

Residential: Documentation

According to the Utah Medicaid Provider Manual (April 2015), 1-8 Documentation,

- A. The provider must develop and maintain sufficient written documentation for each service or session for which billing is made to support the procedure and the time billed. See Chapter 2, Scope of Services, for documentation requirements specific to each service.*
- B. As specified in Chapter 2, documentation of the start and stop time of the service is required.*
- C. To ensure accurate documentation and high quality of care, services should be documented at the time of service.*
- D. The clinical record must be maintained on file in accordance with any federal or state law or state administrative rule, and made available for state or federal review, upon request.*

According to the DHS/DCFS Contract, Part II. Section V: Documentation,

B. INDIVIDUAL CLIENT RECORDS: The Contractor shall develop and maintain written documentation for the following:

- 1. Purchase Service Authorization.*
- 2. Client-specific information provided by the Division.*
- 3. For DHS/DCFS Clients, maintain and update the Home-to-Home Packet at the Client's place of residence and, when the Client is discharged, return the Home-to-Home Packet to the Case Manager.*
- 4. Client's evaluations and assessments, treatment plan; educational, vocational, employment, and/or adult living and basic life skills training plan; and progress toward goals.*
- 5. Weekly schedule of planned activities developed jointly by Client and the Contractor.*
- 6. Record of contacts with each Client during any Client days of absence.*
- 7. Client-specific incident reports.*